

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
COUNTY DEPARTMENT, LAW DIVISION

ANTONIO LEGRIER, Individually )  
and as Special Administrator of )  
the Estate of QUINTONIO LEGRIER, )  
Deceased, )  
                                       )  
                                       Plaintiff, )  
                                       )  
                                       )  
                                       -vs- ) No. 15 L 12964  
                                       )  
                                       )  
CITY OF CHICAGO, )  
                                       )  
                                       )  
                                       Defendant. )  
----- )  
LATARSHA JONES, Individually and ) Cons. with  
as Special Administrator of the )  
Estate of BETTIE RUTH JONES, )  
Deceased, and LATISHA JONES, )  
                                       )  
                                       Plaintiffs, )  
                                       )  
                                       )  
                                       -vs- ) No. 16 L 00012  
                                       )  
                                       )  
CITY OF CHICAGO, )  
                                       )  
                                       )  
                                       Defendant. )

Videotaped discovery deposition of HILARY  
McELLIGOTT, MD, taken under oath on Friday, April 20,  
2018, at 70 West Madison Street, Suite 5500, Chicago,  
Illinois, pursuant to the Rules of the Supreme Court  
of Illinois and the Code of Civil Procedure, before  
Laura L. Kooy, Certified Shorthand Reporter  
No. 084-002467, RDR, CRR, commencing at 10:08 a.m.  
pursuant to notice.

1 APPEARANCES:

2 JAMES D. MONTGOMERY AND ASSOCIATES, LTD.  
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10 on behalf of the Plaintiff Antonio LeGrier,  
11 Individually and as Special  
12 Administrator of the Estate of Quintonio  
13 LeGrier, Deceased;

14 POWER ROGERS & SMITH, PC by  
15 MR. LARRY R. ROGERS, JR.  
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17 on behalf of the Plaintiff Latarsha Jones,  
18 Individually and as Special  
19 Administrator of the Estate of Bettie  
Ruth Jones, Deceased, and Latisha Jones;

20 HALE LAW LLC by  
MS. BARRETT BOUDREAUX  
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21 on behalf of the Defendant City of Chicago.

22 ALSO PRESENT:

23 MR. JIM ROSS, Videographer.

24 \* \* \* \*

1	INDEX	
2	EXAMINATION	PAGE
3	by Mr. Kennedy:	5
4	by Mr. Rogers:	53
5	Further by Mr. Kennedy:	63
6	Further by Rogers:	66
7	Further by Mr. Kennedy:	71
8	by Ms. Boudreaux:	72
9	EXHIBITS	
10	McElligott Exhibit 1	6
11	Curriculum Vitae	
12	McElligott Exhibit 2	16
13	McElligott Report	
14	(Exhibits attached/scanned.)	

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1 (McElligott Exhibits 1 and 2 marked.)

2 THE VIDEO TECHNICIAN: Okay. Recording.

3 For the record, my name is Jim Ross, from  
4 Video Instanter. I am the video recording device  
5 operator for this deposition.

6 Our business address is 134 North LaSalle  
7 Street, Suite 1400, Chicago, Illinois, 60602.

8 This deposition is being video recorded  
9 pursuant to Illinois Supreme Court Rule 206 and all  
10 other applicable state and local rules.

11 We are at 70 West Madison Street,  
12 55th Floor, to take the video recorded discovery  
13 deposition of Hilary McElligott in the matter of  
14 Jones versus City of Chicago, et al., Case  
15 Number 2016 L 0012 in the Circuit Court of  
16 Cook County, Illinois, County Department, Law  
17 Division.

18 Today's date is April 20, 2018, and the  
19 time is approximately 10:08 a.m.

20 This deposition is being taken on behalf of  
21 the plaintiff, and is being video recorded at the  
22 instance of the plaintiff.

23 Will the attorneys present please introduce  
24 themselves for the record?

1 MR. KENNEDY: Jack Kennedy on behalf of the  
2 LeGrier estate.

3 MR. WATKINS: Daniel Watkins on behalf of the  
4 LeGrier estate.

5 MS. BOUDREAUX: Barrett Boudreax on behalf of  
6 the City.

7           THE VIDEO TECHNICIAN: Would the court reporter  
8 please introduce herself and swear in the witness for  
9 the record.

10 MR. THOMAS: He's on his way up.

11 THE REPORTER: My name is Laura Kooy with Urlaub  
12 Bowen & Associates.

13 | (Witness sworn.)

14 HILARY McELLIGOTT, MD,  
15 called as a witness herein, having been first duly  
16 sworn, was examined and testified as follows:

## EXAMINATION

18 | BY MR. KENNEDY:

19 Q Doctor, could you please begin by stating  
20 your name.

21 A My name is Hilary McElligott.

22 Q Okay. I think we're going to go off the  
23 record for a second.

THE VIDEO TECHNICIAN: Okay. We are off the

1 record at 10:08 a.m.

2 (Whereupon, a short recess was taken.)

3 (Whereupon, Mr. Rogers arrived at the  
4 deposition.)

5 THE VIDEO TECHNICIAN: We are back on the record  
6 at 10:10 p.m. -- a.m., rather.

7 BY MR. KENNEDY:

8 Q Doctor, you have before you what's been  
9 marked as Deposition Exhibit Number 1. Correct?

10 A Yes.

11 Q Could you take a look at that and identify  
12 what that is, please.

13 A This is a copy of my CV.

14 Q And does Exhibit Number 1, your CV,  
15 accurately reflect your professional background and  
16 experience?

17 A Yes.

18 Q You are currently employed by the DuPage  
19 County Coroner's Office as the Chief Forensic  
20 Pathologist? Correct?

21 A Yes.

22 Q How long have you held that position?

23 A Since April of 2013.

24 Q And how many other forensic pathologists

1 are employed by the DuPage County Coroner's Office?

2 A No other full-time pathologists.

3 Q Are there contract pathologists?

4 A Yes.

5 Q But you are the only pathologist who is  
6 employed at DuPage County. Correct?

7 A Salaried. Yes.

8 Q Are you employed there full time?

9 A Yes.

10 Q Is that about 40 hours a week?

11 A Approximately.

12 Q My understanding is that in today's case,  
13 you are testifying as a private consultant?

14 A Correct.

15 Q You are not testifying in your capacity as  
16 the Chief Forensic Pathologist of DuPage County then?

17 A That's correct.

18 Q And I take it that DuPage County permits  
19 you to do this work. Correct?

20 A Yes.

21 Q And can you tell us, generally, are there  
22 any conditions imposed on that?

23 A I just have to be off County time. So I'll  
24 take the day off.

1           Q     Would you, for instance, be permitted to  
2 consult on a case like you're doing today if it was a  
3 case where you did the autopsy at DuPage?

4           A     No. That would be a conflict of interest.

5           Q     Why would that be a conflict of interest?

6           A     Just because I can't -- if I understand  
7 your questioning correctly, I can't represent two  
8 different aspects of one case.

9           Q     In other words, if you're the autopsy  
10 pathologist, it would be improper for you to act as a  
11 paid consultant for one side or the other if the case  
12 is in litigation. Correct?

13          A     Correct.

14          Q     When I last took your deposition in 2013,  
15 you told me that you had performed approximately  
16 1,200 autopsies in your career.

17                 As of today, approximately how many  
18 autopsies have you performed?

19          A     Approximately 1,800, 1,850.

20          Q     And are those all full autopsies? Or are  
21 those any postmortem examinations?

22          A     That includes all postmortem exams.

23          Q     So if we were to break it down and say how  
24 many are full autopsies, what would be your answer?

1           A     I'd say approximately 1,100, 1,200. Most  
2 of them.

3           Q     You testified in mid-2013 that as of that  
4 date, you'd performed about 250 autopsies involving  
5 gunshot wounds and that 248 of those would have been  
6 when you were at the Cook County Medical Examiner's  
7 Office. Correct?

8           A     Yes.

9           Q     Would it be fair to say that when you were  
10 at the Cook County Medical Examiner's Office, you  
11 would handle cases involving decedents who had fallen  
12 victim to gunshot wounds with far more regularity  
13 than you do now?

14          A     Yes.

15          Q     Okay. If it was 250 autopsies back in  
16 mid-2013 -- strike that.

17                 Can you give me an estimate, as of today,  
18 as to how many autopsies you've performed on victims  
19 who have fallen -- strike that.

20                 Can you tell me how many gunshot wound  
21 autopsies you've performed as of today's date?

22          A     It's approximately 300.

23          Q     Approximately how many gunshot wound cases  
24 would you handle on an annual basis now at DuPage

1 County?

2 A Far fewer than Cook County. Most of them  
3 are suicidal. I would say at most 2,000, probably, a  
4 year.

5 Q And presently, how many postmortem  
6 examinations would you perform on an annual basis?

7 A I perform approximately 200.

8 It's highly variable at DuPage compared to  
9 Cook County, so it's varied between -- since my  
10 employment started there -- 150 -- between about  
11 150 to what we're on pace for now to be about 250.

12 Q Okay. If you were to give us a breakdown  
13 of, generally, what kind of cases you encounter, are  
14 the majority traffic crash cases? What kind of cases  
15 do you handle?

16 A For DuPage County?

17 Q Correct.

18 A The majority, at present, are drug overdose  
19 cases. So mostly heroin. Fentanyl.

20 Q What would be the second-most common case  
21 you'd see?

22 A Probably various manners of suicide.  
23 Hangings. Train versus pedestrian. Auto versus  
24 pedestrian. Falls from height. Just various

1      traumatic deaths.

2            Q        How many gunshot wound homicide cases would  
3        you handle, on average, a year on behalf of the  
4        DuPage County Coroner's Office?

5            A        Again, variable. They're mostly domestic  
6        related. So between one and five. Five if it's a  
7        bad year.

8            Q        Okay. Some years one?

9            A        Correct.

10          Q        Any years zero, perhaps?

11          A        I don't think we've had a year where there  
12        were none. No.

13          Q        But generally, it would be between one and  
14        five cases where someone has shot someone else that  
15        died. Correct?

16          A        Correct.

17          Q        You are involved in this case because  
18        Ms. Boudreax hired you as a paid consultant.  
19        Correct?

20          A        Yes.

21          Q        You've worked for her before in other  
22        matters? Correct?

23          A        I've worked with her. Yes.

24          Q        Have you ever worked for her as a paid

1 consultant before?

2 A I worked with the City of Chicago on a case  
3 that she was involved in. Yes.

4 Q And that was a case, like this case, where  
5 you were hired as a paid expert. Correct?

6 A Correct.

7 Q In your CV, you list a number of cases  
8 where you've given trial testimony. Correct?

9 A Yes.

10 Q And is that list current, as of today, as  
11 to all the cases in which you've provided trial  
12 testimony as an expert witness?

13 A Yes, I believe it is.

14 Q I assume the vast majority of the cases  
15 where you've testified as an expert witness in the  
16 field of pathology were cases where you actually  
17 performed the autopsy? Is that correct?

18 A Yes.

19 Q Are there any cases on this list that you  
20 can identify where you were testifying as a paid  
21 consultant, as opposed to the autopsy pathologist?

22 A The one that I was referencing previously  
23 is the second to last page, Othman versus City of  
24 Chicago.

1                   And then above that, Ross versus City of  
2 Chicago.

3                   Q       In Ross versus City of Chicago, you were  
4 the autopsy pathologist. Correct?

5                   A       Oh, yeah, maybe I was. Sorry. I can't  
6 recall.

7                   Q       If I tell you that you did the autopsy --

8                   A       I can't recall. Yes.

9                   Q       And actually, you were served a trial  
10 subpoena by both sides. Correct?

11                  A       I'd have to take your word for it. I'm  
12 sorry. They all blend together after a while.  
13 Sorry.

14                  Q       My office has never hired you as a paid  
15 consultant. True?

16                  A       Not as a consultant. No.

17                  Q       We have compensated you for your time when  
18 you've testified to your autopsy findings before.  
19 Correct?

20                  A       Yes.

21                  Q       And at deposition and at trial. Correct?

22                  A       Correct.

23                  Q       And that's because you were the autopsy  
24 pathologist. Correct?

1 A Yes.

2 Q You identified the Othman case as a case  
3 where you worked with Ms. Boudreax before? Correct?

4 A Yes.

5 Q And you were a paid consultant in that  
6 case?

7 A Correct.

8 Q You did not perform the autopsy in that  
9 case?

10 A No.

11 Q And you testified at trial in that matter?  
12 Correct?

13 A Correct.

14 Q And you met with Ms. Boudreax to prepare  
15 your trial testimony in that case? Correct?

16 A Yes.

17 Q Ms. Boudreax brought into court a foam  
18 dummy? Correct?

19 A Yes.

20 Q And you used trajectory rods that you  
21 placed through the dummy to illustrate the various  
22 paths of trajectories in that case. Correct?

23 A Yes.

24 Q And one of the trajectories was through the

1 decedent's arm? Correct?

2 A Possibly. I don't recall specifics.

3 Q And you gave testimony regarding the  
4 positioning of the arm at the time of the shooting.

5 Correct?

6 A Possibly. I don't recall specifics.

7 Q Other than the Othman case, has  
8 Ms. Boudreaux hired you before as a paid consultant?

9 A I don't believe so.

10 Q So your recollection is that aside from  
11 this case, you've only worked with Ms. Boudreaux on  
12 one other case, and that was the Othman case.

13 Correct?

14 A I was trying to remember if I have worked  
15 with her on one prior to that. I couldn't come up  
16 with anything solid in my memory.

17 Q So to the best of your recollection,  
18 there's only the one other case that you've worked  
19 with Ms. Boudreaux on before, and that was the  
20 Othman case. Correct?

21 A I believe so. Yes.

22 Q Are you and Ms. Boudreaux Facebook friends?

23 A Yes, we are.

24 Q You've commented on some of the family

1 photos she's posted? Correct?

2 A Possibly.

3 Q And other than working with her on the  
4 Othman case, did you have any prior contact with  
5 Ms. Boudreaux?

6 A As I mentioned, it may have been through  
7 another case, but I don't recall specifically.

8 Q I guess what I'm getting at is, you didn't  
9 know her before you became involved in cases where  
10 she was representing one side or the other. Correct?

11 A Oh. No.

12 Q My statement's correct. Yes?

13 A Yes. Correct.

14 Q You have before you what's been marked as  
15 Deposition Exhibit Number 2.

16 If you'd take a look at that and identify  
17 it for us, please.

18 A This is a copy of the report I prepared in  
19 this case for Ms. Boudreaux.

20 Q And the report accurately and completely  
21 sets forth the materials that you reviewed? Correct?

22 A Yes.

23 Q The report accurately and completely  
24 reflects all of the opinions you've formed to a

1 reasonable degree of certainty within your field of  
2 expertise? Correct?

3 A Yes.

4 Q Doctor, there is no anatomic reason, that  
5 you are aware of, that would have prevented pain  
6 signals from being transmitted through Mr. Quintonio  
7 LeGrier when he sustained his gunshot wounds.

8 Correct?

9 A I don't know that I understand the  
10 question.

11 Could you rephrase?

12 Q Okay. It's your opinion in this case that  
13 Quintonio LeGrier likely did suffer some modicum of  
14 conscious pain and suffering. Correct?

15 A I don't believe that it's possible to  
16 specifically state, one way or the other, if there  
17 was conscious pain and suffering.

18 Q You have no opinion, within a reasonable  
19 degree of medical certainty, as to whether Quintonio  
20 LeGrier suffered any conscious pain and suffering.

21 Correct?

22 A Correct.

23 Q Are you aware of any anatomic reason, in  
24 terms of the gunshot trajectories to Mr. LeGrier's

1 body, that would have inhibited or prevented him from  
2 having pain signals transmitted?

3 A Are you referring to prior to the incident?  
4 Or -- if you'd --

5 Q If a gunshot -- sure. I'll rephrase it.

6 If a gunshot wound victim is struck and  
7 their spinal cord is completely severed, that would  
8 be an anatomic reason why pain signals would not be  
9 able to be transmitted. Correct?

10 A Yes. Most likely.

11 Q Are you aware of any anatomic reason in  
12 this case why Mr. LeGrier would not have been able to  
13 have pain signals transmitted?

14 A There is no certain autopsy finding that  
15 would indicate that. In my opinion.

16 Q So based on the autopsy findings alone,  
17 there's no reason to believe that Quintonio LeGrier  
18 would have immediately lost consciousness at the time  
19 that he was struck by Officer Rialmo's bullets.  
20 Correct?

21 A Consciousness now? No, there is no  
22 indication that he would have immediately lost  
23 consciousness. No.

24 Q Similarly for Bettie Jones, there's no

1 indication, based on the autopsy findings, that she  
2 would have immediately lost consciousness at the time  
3 she was struck by Officer Rialmo's bullet. Correct?

4 A No anatomic reason. Correct.

5 Q On page 11 of your report, you say that  
6 it's likely that Mr. LeGrier would have lost  
7 consciousness in less than one minute?

8 A Yes.

9 Q Would you agree with me that there was some  
10 interval of time, be it seconds or minutes, when  
11 Mr. LeGrier would have still been conscious after  
12 being struck by the bullets? To a reasonable degree  
13 of certainty.

14 A Yes, I believe within a reasonable degree.

15 Q And based on the autopsy findings alone,  
16 there's no way to quantify that exact interval of  
17 time, other than to say it could have been as short  
18 as seconds and as long as minutes. Correct?

19 A That's correct.

20 Q And, really, the only way to be more  
21 precise about the interval of time during which  
22 Mr. LeGrier would have suffered conscious pain and  
23 suffering would be to consider eyewitness testimony  
24 about his consciousness. Correct?

1 A That's correct.

2 Q In this case, you did not review the  
3 deposition of Antonio LeGrier. Correct?

4 A I'll have to refer to the --

5 Q Please do.

6 A No. I did not.

7 Q You were not provided with, and you did not  
8 review, the deposition testimony of Latisha Jones.  
9 True?

10 A No, I don't believe that I did.

11 Q If Antonio LeGrier described his son being  
12 conscious for some time after the shooting, that  
13 would be information that could help inform your  
14 opinions as to how long Quintonio LeGrier was  
15 conscious. Correct?

16 A Yes.

17 Q If Latisha Jones described holding her  
18 mother in her arms and her mother telling her that  
19 she loved her after the shooting, that would be  
20 information that could help inform your opinions as  
21 to how long Bettie Jones was conscious after the  
22 gunshot wound was sustained. Correct?

23 A Yes.

24 Q But you were unable to take into

1 consideration the deposition testimony of Antonio  
2 LeGrier and Latisha Jones in forming your opinions,  
3 because Ms. Boudreaux did not provide you with those  
4 materials. Correct?

5 A I did not have those materials to review.  
6 Correct.

7 Q Who decided that you would not review the  
8 deposition testimony of Antonio LeGrier?

9 A I don't know the answer to that question.  
10 Q And your answer would be the same if I  
11 asked you about the deposition of Latisha Jones, I  
12 presume. Correct?

13 A Yes. Correct.

14 Q You did not review the autopsy x-rays in  
15 this case?

16 A Correct.

17 Q When you were working at the Cook County  
18 Medical Examiner's Office, you would have -- strike  
19 that.

20 Currently, at DuPage County, you would  
21 review the x-rays for the decedent you were  
22 performing an autopsy on prior to signing your  
23 report. Correct?

24 A Correct.

1 Q Radiographic examination of a decedent is  
2 an important part of the autopsy protocol. Correct?

3 A Yes. It's a portion of it.

4 Q And it's an important portion of it.  
5 Correct?

6 MS. BOUDREAUX: I'll just object to incomplete  
7 hypothetical.

8 BY MR. KENNEDY:

9 Q Okay. Is radiographic examination of a  
10 decedent an important part of the autopsy protocol,  
11 in your opinion, as a forensic pathologist?

12 A I believe that it is -- yes. It is an  
13 important portion of the autopsy.

14 Q And that important information was  
15 unavailable to you in this case. Correct? Well, let  
16 me withdraw that.

17 That important information, the  
18 radiographic examinations of Mr. LeGrier and  
19 Ms. Jones, those x-rays were not something that you  
20 reviewed. Correct?

21 A I did not review them.

22 I did review the interpretation of them.

23 Q But you would not -- strike that.

24 The point of you, I assume, of being a paid

1 consultant in this case is to conduct your own  
2 independent review of the autopsy findings. Correct?

3 A Correct.

4 Q And you could not review the validity of  
5 the autopsy pathologist's interpretation of the  
6 radiographic films because you did not review them.  
7 True?

8 A Correct. I did not review them.

9 Q Okay. And who decided that you would not  
10 review the x-rays of Quintonio LeGrier?

11 A I don't know the answer to that.

12 Q Who decided that you would not review the  
13 x-rays of Bettie Jones?

14 A Again, I don't know the answer to that.

15 Q You consider Spitz and Fisher's Medicolegal  
16 Investigation of Death an authoritative treatise in  
17 your field of specialty. Correct?

18 A It's not necessarily something I rely upon  
19 verbatim. But, yes, it is helpful in interpreting --

20 Q Did you consider it to be --

21 A -- the --

22 Q I'm sorry, I interrupted.

23 Do you consider it to be a reliable text in  
24 the field of forensic pathology?

1 A I do. Yes.

2 Q It was one of the texts that you were  
3 trained on. Correct?

4 A Yes.

5 Q You also consider the book Gunshot Wounds  
6 by Vincent Di Maio to be an authoritative text in  
7 your field. Correct?

8 A Again. A reliable text. Yes.

9 Q Mr. Di Maio uses the term powder  
10 stippling -- strike that.

11 Mr. Di Maio uses the term powder tattooing  
12 to refer to stippling. Correct?

13 A I believe he does. Yes.

14 Q And would you agree, Doctor, that depending  
15 on the firearm and the ammunition, powder tattooing  
16 can be seen at a distance of up to 3 feet?

17 A It, as you may have just mentioned, depends  
18 on the weapon test-fired with the specific  
19 ammunition.

20 I have been trained and taught that while  
21 some reference texts do mention that, that  
22 realistically, 24 inches is the upper range for close  
23 range of fire.

24 Q Other than what you've been told, have you

1 ever done any independent testing of your own to  
2 determine that?

3 A No.

4 Q That would be more of the province of a  
5 ballistics expert?

6 A Yes.

7 Q So as you sit here today, you do not have  
8 an opinion, within a reasonable degree of medical  
9 certainty, as to the maximum distance between the  
10 muzzle and the victim where stippling can be seen.  
11 True?

12 MS. BOUDREAUX: I'll --

13 BY MR. KENNEDY:

14 Q Because it depends on the ammunition and  
15 the firearm. Correct?

16 MS. BOUDREAUX: I'll object to the form of that  
17 question. And as mischaracterizing her testimony.

18 BY MR. KENNEDY:

19 Q You can go ahead and answer.

20 A I'm sorry, can you restate?

21 Q Sure. You said that you've read in texts  
22 that it can be 3 feet, but you've also heard that it  
23 can be 24 inches. Correct?

24 A Yes.

1 Q And you don't have an opinion, within a  
2 reasonable degree of medical certainty, as to whether  
3 it's 3 feet or 24 inches. Correct?

4 MS. BOUDREAU: I'll --

5 BY MR. KENNEDY:

6 Q Because it depends on the ammunition.  
7 Correct?

8 MS. BOUDREAU: I'm going to object to the form  
9 of that question. Compound. And mischaracterizing  
10 her testimony.

11 THE WITNESS: I consider 24 inches to be the  
12 upper range for close range of fire.

13 BY MR. KENNEDY:

14 Q But you certainly do not disagree with the  
15 medical literature that you consider reliable in your  
16 field which indicates that it can be up to 3 feet.  
17 Correct?

18 MS. BOUDREAU: Objection. Mischaracterizes her  
19 testimony.

20 THE WITNESS: The texts do say that. And I  
21 can't change that. I'm sure they have their  
22 reasoning for it.

23 But my training and experience has  
24 indicated 24 inches to be the upper limit for close

1 range of fire.

2 BY MR. KENNEDY:

3 Q You have no basis for disagreeing with the  
4 proposition that it may be seen up to 3 feet.

5 Correct?

6 MS. BOUDREAU: Objection. Asked and answered.

7 Same objections.

8 Answer one more time.

9 THE WITNESS: Again, there are texts that do  
10 state that it can be. And, again, that would be very  
11 specific, depending on the weapon test-fired with the  
12 exact ammunition.

13 So it's very dependent on circumstances.

14 BY MR. KENNEDY:

15 Q And I understand that. And I'm saying, you  
16 don't -- strike that.

17 I noticed in your report you used the term  
18 "significant" in the context of conscious pain and  
19 suffering. Is that correct?

20 A I did. Yes. On page 11.

21 Q Is there a standard definition, in your  
22 field of specialty, as to what constitutes, quote,  
23 significant and, quote, conscious pain and suffering?  
24 Or is that your own subjective description in this

1 case?

2 A That's a subjective description.

3 Q Your subjective value judgment is that  
4 Quintonio LeGrier's conscious pain and suffering was  
5 insignificant. Correct?

6 MS. BOUDREAUX: I'll just object to that  
7 characterization.

8 You can answer.

9 THE WITNESS: I wouldn't state that. No.  
10 That's not the word I would choose as its opposite.

11 BY MR. KENNEDY:

12 Q Okay. Your subjective value judgment is  
13 that Mr. LeGrier did not sustain significant  
14 conscious pain and suffering. Correct?

15 A Could you -- I'm sorry, could you state  
16 that again?

17 Q Sure. Your subjective opinion is that  
18 Mr. LeGrier did not sustain significant conscious  
19 pain and suffering. Correct?

20 A Correct.

21 Q And your opinion is that Bettie Jones was  
22 struck by one of Officer Rialmo's bullets? Correct?

23 A Yes.

24 Q And the bullet wound trajectory was

1 through -- strike that.

2                   The bullet wound trajectory through Bettie  
3 Jones' chest was downward. Correct?

4                   A     I believe so. Yes.

5                   Q     And it's your opinion, to a reasonable  
6 degree of medical certainty, that Ms. Jones' body was  
7 likely leaned forward when she sustained the gunshot  
8 wound to the chest? Correct?

9                   A     It's consistent with that positioning.  
10 Yes.

11                  Q     And Ms. Jones' leaned forward body position  
12 would be consistent with her ducking or attempting to  
13 get on the ground. Correct?

14                  A     It could be. Yes.

15                  Q     And that would be your opinion to a  
16 reasonable degree of medical certainty in your field  
17 of specialty. Correct?

18                  A     Yes.

19                  Q     Your opinion is that Quintonio LeGrier was  
20 struck by a minimum of five and a maximum of six of  
21 Officer Rialmo's bullets? Correct?

22                  A     That's correct.

23                  Q     Okay. You do not know whether it was five  
24 or six bullets that struck Quintonio LeGrier. True?

1 A Correct.

2 Q In your opinion, it's not possible to  
3 determine the exact positioning of the arm, relative  
4 to the weapon, at the time of the shooting because  
5 the arm is a mobile part of the body? Correct?

6 A That's correct.

7 Q You, therefore, have no opinion, within a  
8 reasonable degree of medical certainty, as to the  
9 exact position of Quintonio LeGrier's left arm at the  
10 time of the shooting. True?

11 A Correct.

12 Q As I understand your opinion, there are  
13 many possible positions in which Quintonio LeGrier's  
14 left arm could have been in at the time he sustained  
15 the gunshot wound to his left arm. Correct?

16 A Yes.

17 Q Some of the possible ways in which  
18 Quintonio LeGrier's left arm could have been  
19 positioned during the shooting would be consistent  
20 with Officer Rialmo's testimony? Is that your  
21 opinion?

22 A I believe so. Yes.

23 Q It's equally possible that Quintonio  
24 LeGrier's left arm could have been in a position that

1 is inconsistent with Officer Rialmo's testimony.

2 True?

3 MS. BOUDREAU: I'll object to the form of the  
4 question.

5 You can answer, if you understand that.

6 THE WITNESS: I'm not comfortable answering  
7 that. I guess I would need more specific information  
8 as to what the scenario would be.

9 BY MR. KENNEDY:

10 Q It's your opinion in this case that there  
11 are many possible bullet trajectories that may have  
12 occurred with respect to Mr. LeGrier's left arm  
13 positioning. Correct?

14 A Yes.

15 Q Some of those possibilities would be  
16 consistent with Officer Rialmo's testimony. Some of  
17 the other possibilities would be inconsistent with  
18 his testimony. Correct?

19 MS. BOUDREAU: Same objection. Calls for  
20 speculation. Form. Incomplete hypothetical.

21 THE WITNESS: I'm -- if there's -- I have  
22 specific scenarios, because I understand what  
23 Officer Rialmo's depositions say.

24 But I don't know how to answer that

1 question, because I don't know what you're asking me.  
2 I don't know where you're asking as far as the arm  
3 position goes.

4 Like I can answer a specific scenario for  
5 you. But I don't feel comfortable answering a large,  
6 vague question like that because I just -- I don't  
7 understand it.

8 BY MR. KENNEDY:

9 Q Okay. It would be pure speculation for you  
10 to say that Quintonio LeGrier's arm, in fact, was  
11 positioned in the manner in which Officer Rialmo  
12 described. Correct?

13 MS. BOUDREAUX: I'll object to the form. "Pure  
14 speculation."

15 THE WITNESS: I disagree.

16 And the whole basis of my opinion is based  
17 on the autopsy findings. Not just speculation.

18 BY MR. KENNEDY:

19 Q Well, I understand that.

20 My point is that you cannot say, to a  
21 reasonable degree of medical certainty, that  
22 Quintonio LeGrier's arm was in a position that is  
23 consistent with Officer Rialmo's testimony. True?

24 MS. BOUDREAUX: Objection. Mischaracterizes

1 what she just testified to.

2 THE WITNESS: I can't state for certain exactly  
3 what position it was in. That's -- that's my  
4 statement.

5 BY MR. KENNEDY:

6 Q And given that you don't know exactly what  
7 position the arm was in, you can't say whether it  
8 matches or does not match Officer Rialmo's testimony.  
9 True?

10 MS. BOUDREAU: I'm just going to object to  
11 mischaracterizing her testimony.

12 You can explain.

13 THE WITNESS: If I -- again, if I had a specific  
14 scenario that you're trying to get me to answer, I  
15 would be able to answer it.

16 But I -- I don't know if I'm answering your  
17 question correctly. Can you rephrase it? Because I  
18 feel like you're just asking me to answer a vague  
19 question. And I'm just really uncomfortable with the  
20 form, I guess.

21 BY MR. KENNEDY:

22 Q Well, you do not know how Quintonio  
23 LeGrier's arm was positioned at the time of the  
24 shooting. True?

1 A True.

2 Q Therefore, you don't know whether it  
3 matches Officer Rialmo's -- strike that.

4 Therefore, you do not know whether  
5 Quintonio LeGrier's arm was positioned as described  
6 by Officer Rialmo. True?

7 MS. BOUDREAU: Same objection to the form.

8 THE WITNESS: I can say that it is consistent  
9 with what he is describing.

10 BY MR. KENNEDY:

11 Q It could also be inconsistent with what he  
12 is describing. True?

13 MS. BOUDREAU: Objection. Calls for  
14 speculation.

15 MR. KENNEDY: If you'll stipulate that it calls  
16 for speculation, her whole opinion as to consistent  
17 or inconsistent calls for speculation.

18 MS. BOUDREAU: No.

19 THE WITNESS: Based on the information I have, I  
20 don't -- I believe it's consistent. I don't know how  
21 else to answer that question without more specific --  
22 I'm not trying to be difficult. I just really,  
23 honestly, don't know how to answer that question  
24 reasonably without more specific information.

1 BY MR. KENNEDY:

2 Q You're comfortable saying that  
3 Officer Rialmo's testimony is consistent with the  
4 gunshot trajectory to Quintonio LeGrier's left arm,  
5 even though you do not know how Quintonio LeGrier's  
6 left arm was positioned. Correct?

7 A I was not there, so I did not witness it.  
8 That's correct.

9 But based on the description of events that  
10 I have reviewed and the autopsy findings, I feel that  
11 everything combined makes those injuries consistent  
12 with the description of the events.

13 Q But you don't actually know where the arm  
14 was positioned. Correct?

15 MS. BOUDREAU: Asked and answered. She's not  
16 going to answer that anymore.

17 She already answered it a number of times.

18 BY MR. KENNEDY:

19 Q How can you say that Quintonio LeGrier's  
20 arm positioning is consistent with Officer Rialmo's  
21 description if you do not know how his arm was  
22 positioned?

23 A Because I'm using the description as my  
24 understanding of how the arm was positioned.

1 Q Which description?

2 MS. BOUDREAUX: Object to vague.

3 THE WITNESS: Could you be more specific?

4 BY MR. KENNEDY:

5 Q You said that Officer Rialmo's description  
6 was consistent with the injury. And I'm asking you  
7 what specific description offered by Officer Rialmo  
8 are you relying on?

9 A There is not one that I can pick. I've  
10 reviewed multiple documents. And in reviewing them  
11 as a whole, the picture that's created in the  
12 depositions that were given are what I took into  
13 consideration. I can't point to one specific.

14 Q Did you find in your review of material  
15 that Officer Rialmo's description of the events was  
16 consistent with his other descriptions of the same  
17 events?

18 A They were not word for word exact, no.

19 Q Well, for example, you reviewed  
20 Officer Rialmo's IPRA statement. Correct?

21 A I believe so. Yes.

22 Q Starting on page 3, there are summaries of  
23 information that was contained within the IPRA  
24 statement. Correct?

1 A Yes.

2 Q Now, did you actually review the  
3 IPRA statement and type out these descriptions? Or  
4 did you copy them from somewhere?

5 A No, I reviewed them.

6 Q Okay. And these are all your words?

7 A So are you referring to my report?

8 Q Yes.

9 A Yes.

10 Q Page 3 of the report.

11 A I did that myself. Yes.

12 Q Okay. Because it's quite a lengthy summary  
13 you provide of the IPRA statement. Correct?

14 A Correct.

15 Q And before you looked like you were a  
16 little unsure as to whether you had reviewed his  
17 IPRA statement or not. That's why I was asking.

18 A I just don't want to misspeak.

19 Q I appreciate that.

20 In his IPRA statement, Officer Rialmo told  
21 the investigators that he was off the stairs. Not on  
22 the stairs. But on the concrete walkway when he  
23 started firing his weapon. Correct?

24 A Yes.

1 Q And then in his deposition, he changes that  
2 and says that he was on the stairs when he started  
3 firing his weapon. Correct?

4 A I believe so. Yes.

5 Q And those two facts are irreconcilable.  
6 Right?

7 A The fact that he said different things? Is  
8 that what you're referring to?

9 Q The two accounts. That he's not on the  
10 stairs, and then the other account where he says he's  
11 on the stairs, those are -- they can't both be true.  
12 Correct?

13 MS. BOUDREAUX: Well, I'll just object to vague  
14 as to time frame.

15 MR. KENNEDY: Okay.

16 MS. BOUDREAUX: And calling for speculation.  
17 BY MR. KENNEDY:

18 Q We talked earlier about the fact that in  
19 his IPRA statement, Officer Rialmo said that he was  
20 off the stairs when he started firing his weapon.  
21 Correct?

22 A I believe so.

23 Q And then in his deposition, where did he  
24 say he was when he fired his first shot?

1 A I don't remember specifically.

2 Q Did you read the deposition of  
3 Officer Rialmo?

4 A I did.

5 Q Did you read both parts of that deposition?

6 A Yes, I did.

7 Q And in his deposition -- well, strike that.

8 If you look at your report, are you able to  
9 refresh your recollection as to where Officer Rialmo  
10 says he was in his deposition at the time he fired  
11 his first shot?

12 A In -- on page 5 of my report, Number 3, he  
13 states he fired while he was on the porch. And then  
14 between there and the walkway.

15 Q So based on your review of Officer Rialmo's  
16 deposition, it was your understanding that  
17 Officer Rialmo was on the top porch at the time he  
18 fired his first shot. Correct?

19 A In his deposition, that's what is  
20 indicated. Yes.

21 Q And that's obviously inconsistent with him  
22 firing his first shot when he's off the stairs on the  
23 concrete walkway. Correct?

24 A Yes. I can't disagree with that -- that

1 those are two different statements.

2 Q And you've reviewed the crime scene  
3 photographs in this matter?

4 A I have seen -- I don't know if I've seen  
5 all of them. But I have seen some. Yes.

6 Q Do you know which ones you looked at and  
7 which you didn't?

8 A The overall porch/walkway steps photograph  
9 with the casing tents.

10 Q You didn't review the photographs inside  
11 the house that showed the various blood pools?

12 A I did see those. Yes.

13 Q Mr. LeGrier sustained a graze wound to the  
14 back of his right shoulder? Correct?

15 A Yes.

16 Q To a reasonable degree of medical  
17 certainty, for Mr. LeGrier to sustain the wound to  
18 the back of his shoulder, the barrel of the offending  
19 weapon would have been pointed at his back. True?

20 A Relative to the weapon, yes, the barrel is  
21 pointing towards the back side of the decedent,  
22 Mr. LeGrier. Correct.

23 Q And also with respect to the wound that  
24 partially transected Mr. LeGrier's spinal column,

1 that wound was sustained while Mr. LeGrier's back was  
2 facing the barrel of the offending weapon, to a  
3 reasonable degree of medical certainty. Correct?

4 A Yes.

5 Q The gunshot wound to Mr. LeGrier's  
6 buttocks, that, to a reasonable degree of medical  
7 certainty, was sustained when the offending weapon's  
8 barrel was pointed at Mr. LeGrier's back, or the  
9 posterior aspect of his body. Correct?

10 A That is how they were, relative to one  
11 another, yes.

12 Q Officer Rialmo testified that he fired all  
13 of his shots in under a second. Correct?

14 A I believe that's true. Yes.

15 Q Officer Rialmo also testified that  
16 Quintonio LeGrier was facing him when he started  
17 shooting. Correct?

18 A Yes.

19 Q And Officer Rialmo clarified in his  
20 deposition testimony that by facing him, he meant  
21 that the front of Quintonio LeGrier's torso was  
22 facing the front of Officer Rialmo's torso. Correct?

23 A Yes, I believe he said that.

24 Q If Mr. LeGrier was moving directly towards

1      Officer Rialmo with the front of his torso directly  
2      in line with the offending weapon, he would, to a  
3      reasonable degree of medical certainty, have  
4      sustained a straight-on gunshot wound. Correct?

5            MS. BOUDREAUX: Well, object to incomplete  
6      hypothetical and vague as to time frame.

7      BY MR. KENNEDY:

8            Q       She's answered that in other cases.

9                    Go ahead.

10          A       Can you, I guess, be more specific with the  
11      scenario?

12          Q       If Mr. LeGrier was front-facing the officer  
13      in that his torso, the front of his torso, was facing  
14      the front of the officer's torso. Do you understand  
15      what I mean by front-facing --

16          A       Yes.

17          Q       -- if I give you that definition?

18          A       I do.

19          Q       If Mr. LeGrier was front-facing the  
20      officer, and the officer was holding his weapon at  
21      his side or in front of him, pointing towards  
22      Mr. LeGrier, Mr. LeGrier, to a reasonable degree of  
23      medical certainty, would have sustained a straight-on  
24      gunshot wound. Correct?

1           A     If it was at straight-on, as I think you're  
2 describing like this, 90-degree angle, and he fired  
3 at the same time that the victim was facing him,  
4 perpendicular -- (indicating) -- then in that  
5 hypothetical situation, yes, it would be a  
6 front-facing gunshot wound.

7           Q     And if Mr. LeGrier was front-facing the  
8 officer and the officer was holding his weapon in  
9 front of the officer, it would be a front-facing  
10 gunshot wound?

11          MS. BOUDREAUX: Asked and answered.

12                You can answer again.

13          THE WITNESS: I don't -- I don't use the term  
14 specific -- I mean, in my reports, I don't  
15 necessarily use that term.

16               But, again, yes, if the individual, the  
17 victim in question, were standing at -- standing  
18 straight and the barrel of the gun is pointed towards  
19 the front of the victim as you're indicating, at a  
20 90-degree angle relative to the victim, then, yes,  
21 that would be a gunshot wound to the anterior front  
22 aspect of the body.

23 BY MR. KENNEDY:

24           Q     If Mr. LeGrier were front-facing the

1 officer at the time the officer fired his weapon,  
2 Mr. LeGrier would sustain a markedly front-to-back  
3 gunshot wound, to a reasonable degree of medical  
4 certainty. Correct?

5 MS. BOUDREAUX: Objection to incomplete  
6 hypothetical and vague.

7 THE WITNESS: I, again, don't think there's  
8 enough information. I think you're asking me that if  
9 that exact situation played out, is that what would  
10 be seen at autopsy. And I would say that if -- I  
11 don't want to assume that's what you're asking.

12 Could you ask me specifically?

13 BY MR. KENNEDY:

14 Q What additional details would you need in  
15 order to determine whether Mr. LeGrier was  
16 front-facing Officer Rialmo, and Officer Rialmo fired  
17 a shot at his chest, whether it would be a markedly  
18 front-to-back gunshot wound, to a reasonable degree  
19 of medical certainty?

20 A The most important details would be -- if  
21 you're trying to determine the location of the victim  
22 to the shooter, would be the orientation of the  
23 victim and the orientation of the shooter and then  
24 the angle at which the gun is located relative to the

1 victim.

2 Q Okay. Do you understand if I'm -- I'm  
3 saying that Mr. LeGrier was front-facing the officer.  
4 What additional information would you need with  
5 regard to the orientation of Mr. LeGrier? In order  
6 to answer the question.

7 A I don't even know what question I'm  
8 answering right now, to be honest. I'm sorry.

9 I'm not trying to be difficult. I just --  
10 I'm getting ...

11 Q There's no evidence of any intermediary  
12 targets in this case. Correct?

13 A Correct.

14 Q There's no evidence of any deflection or  
15 deviation in the bullet wound paths for either of the  
16 victims. Correct?

17 A Correct.

18 Q So assuming there's no intermediary targets  
19 and the victim is front-facing the shooter --

20 A Okay.

21 Q -- are we good so far?

22 A Yes.

23 Q Okay. Wouldn't firing that gun create a  
24 front-to-back trajectory?

1 MS. BOUDREAU: Still object to incomplete  
2 hypothetical.

3 THE WITNESS: It depends on where the gun is  
4 relative to the victim.

5 So if the shooter is above the victim, it's  
6 going to be a downward trajectory.

7 If he's below, it will be upward.

8 If he's on a level, relatively level angle,  
9 it would be front to back I guess is what you --

10 BY MR. KENNEDY:

11 Q But whether it's downward or upward or on  
12 the same plane, it's still front to back. Correct?

13 A Yes.

14 Is that what you're asking?

15 Q Yes.

16 A If it's front to back? Yes.

17 Q I'm just asking about front to back. I'm  
18 not asking about angled upward or angled downward.

19 A Okay. Then, yes, if it's front to back,  
20 the gun needs to be in the front of the victim if  
21 you're going to see -- and I'm referring just to  
22 the -- you're asking about the torso --

23 Q Correct.

24 A -- relative to the weapon --

1 Q Correct.

2 A -- in this very stationary hypothetical  
3 situation.

4 So if the gun is at a 90-degree angle to a  
5 stationary torso that is 180 degrees, then, yes,  
6 front to back.

7 Q And the angles could be different and it  
8 would still be front to back. It could be upwards or  
9 downwards but it would still be front to back.  
10 Correct?

11 A Well, if the torso is moving, it wouldn't  
12 necessarily be front to back. The torso can twist  
13 from side to side. (Indicating.)

14 Q Right. But if Quintonio LeGrier is  
15 front-facing the officer, meaning his torso is facing  
16 the officer, if the officer shoots him with a gun, it  
17 would create a front-to-back trajectory. Right? A  
18 markedly front-to-back trajectory?

19 A Again, if the torso -- if the front of the  
20 torso is facing the barrel of the gun, yes.

21 But I can't assume that in this case,  
22 because this is a -- a fluid and progressive  
23 situation. It's not like Mr. LeGrier, in my  
24 understanding, is standing still and Officer Rialmo

1 is standing still. There are body movements to take  
2 into consideration like the torso which is, you know,  
3 capable of twisting. So I have to consider that in  
4 this situation.

5 Q And the torso's also capable of not  
6 twisting. Correct?

7 A Correct. Which is why I said, in a  
8 hypothetical scenario, when it's stationary, and the  
9 gun is pointed at a 90-degree angle to a stationary  
10 torso that is facing it, then, yes, you could see a  
11 front-to-back trajectory.

12 Q Not that you could see. You would see, to  
13 a reasonable degree of medical certainty, that.  
14 Correct?

15 A Yes. Yes.

16 Q Okay.

17 MS. BOUDREAUX: Do you want a break? Let's take  
18 a bathroom break.

19 MR. KENNEDY: Okay.

20 MS. BOUDREAUX: Okay?

21 THE VIDEO TECHNICIAN: We are off the record at  
22 10:55 a.m.

23 (Whereupon, a short recess was taken.)

24 THE VIDEO TECHNICIAN: We are back on the record

1 at 11:01 a.m.

2 BY MR. KENNEDY:

3 Q How wide or narrow is the spinal cord of an  
4 adult male at the area of L1-L2?

5 A I don't know what the specific anatomic  
6 textbooks would say. I would estimate it maybe  
7 .4-inch, .5-inch. That's just an estimation. I  
8 don't remove that area of the spinal cord routinely.

9 Q A half inch at the most?

10 A That's just an estimate on my part. A  
11 guess.

12 Q That's a best estimate?

13 A It's a guesstimate. Yes.

14 Q Well, I don't want you to guess. So if you  
15 don't have an opinion, within a reasonable degree of  
16 medical certainty, as to the width or narrowness of  
17 an adult male's spinal cord at L1-L2, tell me that.  
18 Otherwise, if the half an inch --

19 A Well, I can't be very specific about it.  
20 So I will not give you an exact measurement. How's  
21 that?

22 Q Can you give me a best approximation?  
23 Would it be the half inch you testified to?

24 A Again --

1 Q Or are you guessing?

2 A Well, I'm -- I don't take out very many. I  
3 would say I've taken out three or four. So I don't  
4 really want to give you an exact measurement.

5 Q It's a fragile part of the body?

6 A Yes.

7 Q If you sustain a traumatic injury to the  
8 spinal cord, those injuries are normally  
9 life-threatening, paralyzing, or have other severe  
10 consequences for the victim. Correct?

11 MS. BOUDREAUX: Object to incomplete  
12 hypothetical.

13 THE WITNESS: Depending on the level of the  
14 spinal cord injury, it does have different  
15 consequences. But it's not a good thing to have a  
16 spinal cord injury. Correct.

17 BY MR. KENNEDY:

18 Q As a projectile fired from a 9-millimeter  
19 semi-automatic weapon travels through the body, does  
20 it create a cone or a path of damage within the body?

21 A All bullet wounds do create an elastic  
22 tunnel through them as they pass through the body.  
23 So, yes, a 9-millimeter would as well.

24 Q And that elastic tunnel is an area of

1 damage within the body. Correct?

2 A Correct.

3 Q And I assume a 9-millimeter projectile, in  
4 your experience, creates a wider than 9-millimeter  
5 area, tunnel, of damage?

6 A Yes. The energy dissipates beyond the  
7 actual bullet itself.

8 If that's what you're asking.

9 Q It is.

10 Are you able to give us some sense of how  
11 wide or narrow that tunnel of damage is in the  
12 context of a 9-millimeter projectile?

13 A Not specifically, no.

14 Q We know that one of the shots to  
15 Mr. LeGrier partially transected his spinal column.  
16 Correct?

17 A Yes.

18 Q And as I understand your opinion, you don't  
19 know, to a reasonable degree of medical certainty,  
20 whether or not that wound would have caused  
21 Mr. LeGrier to become immediately paralyzed. True?

22 A Correct.

23 Q There's a photograph of that wound.  
24 Correct?

1 A Yes.

2 Q And in terms of identifying the severity of  
3 that injury, how would you do that?

4 A Could you be more specific?

5 Q In terms of the partial transection.

6 A I guess could you be more specific?

7 Q Sure. Would the x-rays in this case help  
8 you determine the tunnel of damage created by that  
9 projectile? Given that the projectile was recovered  
10 from the area of L1-L2.

11 A I don't believe so, actually, no.

12 Q Okay. But you haven't looked at the  
13 x-rays, so you don't know whether they'd be helpful  
14 to you in determining the significance of that spinal  
15 column injury. True?

16 A I don't use x-rays to determine  
17 significance of soft tissue injury in general. So I  
18 would not use that in my -- my assessment of a spinal  
19 cord injury.

20 Strictly speaking, those x-rays in a  
21 gunshot wound case are often for location of  
22 projectiles and determining fractures. Not for soft  
23 tissue assessment.

24 Q But to the extent the projectile was

1 retained within the body, the x-ray would be helpful  
2 to you to determine the location, anatomically, of  
3 that projectile. True?

4 A Yes.

5 Q You have not attempted to reconstruct the  
6 scene and determine where all the individual  
7 participants were. Correct?

8 A Physically? No.

9 Q And you don't have an opinion, within a  
10 reasonable degree of medical certainty, as to the  
11 exact position of Quintonio LeGrier at the time of  
12 the shooting. True?

13 A That's correct.

14 Q And same for Bettie Jones. True?

15 A That's correct.

16 Q I think at this point, I'd yield the  
17 questioning over to Mr. Rogers.

18 EXAMINATION

19 BY MR. ROGERS:

20 Q Hi, Doctor.

21 Hi, Dr. McElligott. Did I pronounce that  
22 correctly?

23 A Yes.

24 Q I think I just have a few questions.

1 Hopefully we won't keep you long.

2                   In your opinion, to a reasonable degree of  
3 certainty within the field of forensic pathology, it  
4 was as a result of being struck by Officer Rialmo's  
5 bullet that Bettie Jones experienced extensive  
6 internal injuries. Correct?

7                   A      Yes.

8                   Q      Those injuries included a perforation of  
9 her heart? True?

10                  A      Yes.

11                  Q      A perforation of her aorta? True?

12                  A      Yes.

13                  Q      Perforation of her esophagus causing  
14 associated bilateral hemothoraces? Correct?

15                  A      Yes.

16                  Q      Perforation of the hemocardium? True?

17                  A      Hemocardium is blood within the  
18 pericardial sac. So perforation of the pericardium  
19 would be more accurate. But, yes.

20                  Q      And fractures of her sternum. True?

21                  A      Correct.

22                  Q      Those injuries, in your opinion, to a  
23 reasonable degree of medical certainty, would cause  
24 her conscious pain and suffering. True?

1 A It's possible to a degree. Yes.

2 Q She was conscious, based upon your review  
3 of the materials, at the time that she was shot.  
4 Correct?

5 A I don't know that I specifically saw that.  
6 I'm trying to remember.

7 MS. BOUDREAU: He said at the time she was  
8 shot.

9 THE WITNESS: Oh, at the time she was shot, yes,  
10 she was conscious. Sorry.

11 BY MR. ROGERS:

12 Q And as a result of sustaining the gunshot  
13 wound from the bullet fired by Officer Rialmo, she  
14 would have experienced conscious pain and suffering.  
15 True?

16 A To what degree, I can't speculate, but --

17 Q I didn't ask you to what degree.

18 My question is this. In your opinion, to a  
19 reasonable degree of medical certainty within the  
20 field of forensic pathology, Bettie Jones, more  
21 likely than not, suffered conscious pain and  
22 emotional suffering as a result of the bullet that  
23 was fired by Officer Robert Rialmo. True?

24 A Yes.

1 Q That bullet caused the injuries, the  
2 extensive internal injuries, that we just described.  
3 Correct?

4 A Yes.

5 Q And as a result of those injuries, she  
6 sustained conscious pain and suffering. True?

7 A Yes.

8 Q You described blood collecting in her  
9 pericardial sac. Is that correct?

10 A Yes.

11 Q And blood collection in the  
12 pericardial sac, it causes a tamponade effect and  
13 pressure on the heart. Correct?

14 A Yes.

15 Q And what impact does that have on the  
16 heart?

17 A It prevents it from pumping the blood or  
18 beating.

19 Q As blood accumulates and collects in the  
20 pericardial sac surrounding the heart, it compresses  
21 the heart and affects its ability to beat. Correct?

22 A Yes.

23 Q Would you agree that Bettie Jones likely  
24 experienced a change to her respiration rate as her

1 condition began to decline as a result of that  
2 bleeding?

3 A Yes.

4 Q And what would you expect, in your opinion,  
5 to have occurred as a result with respect to her  
6 bleeding and respiration rate?

7 A Again, I'm not a clinician. So I don't  
8 know what, necessarily, the immediate responses are.  
9 I mean, obviously the eventual -- eventual outcome is  
10 a gradual slowing of the respiration rate. But I  
11 don't know if that's the immediate response or not.

12 (Whereupon, Mr. Thomas arrived at the  
13 deposition.)

14 BY MR. ROGERS:

15 Q You did not -- you were not provided the  
16 sworn deposition testimony of her daughter, Latisha  
17 Jones, who described what she observed in the time  
18 period following her mother's injury. True?

19 A Correct.

20 Q That, again, would be helpful to you in  
21 discerning exactly what impact the gunshot wound, and  
22 the injuries caused by that wound, had on Bettie  
23 Jones in the minutes following the injury. True?

24 A It's possible. Yes.

1 Q Well, if she described what her mother was  
2 saying to her and what she sensed in terms of her  
3 respiration rate and her activities, that would be  
4 helpful to you in discerning the length of time  
5 Bettie Jones sustained conscious pain and suffering.  
6 True?

7 A Yes.

8 Q If you had been provided the discovery  
9 deposition of Latisha Jones -- strike that.

10 In your opinion, to a reasonable degree of  
11 certainty within the field of forensic pathology,  
12 Bettie Jones' manner of death was homicide as a  
13 result of a gunshot wound -- gunshot fired by  
14 Officer Rialmo. True?

15 A Yes. The manner is homicide.

16 Q In your opinion, to a reasonable degree of  
17 certainty within the field of forensic pathology,  
18 Quintonio LeGrier died -- or the manner in which he  
19 died was homicide as a result of a gunshot fired by  
20 officer -- or multiple gunshots fired by  
21 Officer Rialmo. True?

22 A The manner would be homicide. Yes.

23 Q In your -- strike that.

24 In your report, you do not identify any

1 conditions or ailments that you can say, to a  
2 reasonable degree of medical certainty, would  
3 reduce -- that would have reduced Bettie Jones' life  
4 expectancy. True?

5 A That's correct.

6 Q Bettie Jones sustained a front-to-back  
7 anterior, meaning front-facing, gunshot wound as a  
8 result of a bullet fired by Officer Robert Rialmo.  
9 True?

10 A Correct.

11 Q So she would have been facing the weapon  
12 that he was pointing in her direction. True?

13 A The -- yes. The front of her body was --  
14 and the barrel of the gun were positioned relative to  
15 one another. Yes. (Indicating.)

16 Q Would it be fair to characterize the  
17 location of Bettie Jones' wound as more or less in  
18 the center of her chest?

19 A It was very close to the center. Yes.

20 Q Would it be fair to say that Bettie Jones'  
21 gunshot wound was front to back with a downward  
22 trajectory and was consistent with her attempting to  
23 get out of the way?

24 MS. BOUDREAUX: I'm going to object. Calls for

1 speculation.

2 BY MR. ROGERS:

3 Q You may answer.

4 A Could you be more specific with "attempting  
5 to get out of the way"?

6 Q Would it be fair to say that a gunshot  
7 wound that was front to back with a downward  
8 trajectory of the type that Bettie Jones sustained  
9 would be consistent with her attempting to get down,  
10 meaning leaning forward to get down out of the way?

11 A I think that it could be consistent with a  
12 forward-leaning position. Yes.

13 Q This tunnel of damage -- strike that.

14 You believe the 9-millimeter bullet that  
15 traveled through Bettie Jones' chest and lodged in  
16 her back, perforating various organs ranging from the  
17 heart to the aorta to her esophagus and then  
18 traveling through her sternum, would have caused a  
19 tunnel of damage?

20 A Yes. All bullets do.

21 Q And that's your opinion to a reasonable  
22 degree of certainty within the field of forensic  
23 pathology?

24 A Yes.

1 Q Do you know Dr. Lary Simms?

2 A No.

3 Q You subjectively characterized, in your  
4 report, Bettie Jones to have sustained an  
5 insignificant amount of pain and suffering. Is that  
6 correct?

7 MS. BOUDREAU: I'll object to the form of the  
8 question.

9 THE WITNESS: No, I didn't state that.

10 BY MR. ROGERS:

11 Q You subjectively characterized Bettie Jones  
12 to have experienced -- strike that.

13 In your opinion, Bettie Jones did sustain  
14 conscious pain and suffering. True?

15 A Correct.

16 Q But you subjectively characterize that pain  
17 and suffering as being insignificant. True?

18 MS. BOUDREAU: Same objection. To that word.

19 THE WITNESS: No, I did not use that word.

20 BY MR. ROGERS:

21 Q You are of the opinion that Bettie Jones  
22 did not sustain significant conscious pain and  
23 suffering. Is that correct?

24 A That's what I stated. Yes.

1 Q And that's your subjective characterization  
2 of the degree of her pain and suffering. True?  
3

4 MS. BOUDREAUX: I'll object to that  
5 characterization.

6 How did you form that opinion?

7 BY MR. ROGERS:

8 Q You may answer.

9 My question is a direct question.  
10 You subjectively characterized Bettie Jones  
11 as unlikely experiencing a significant amount of  
conscious pain and suffering. True?

12 A True.

13 Q And, again, that was without having  
14 reviewed the testimony of her daughter and eyewitness  
15 who sat there with her and described, in detail,  
16 exactly what she saw, observed, and heard her mother  
17 say. True?

18 A Correct. I did not read that deposition.

19 Q You have never gone to the scene. Correct?

20 A Correct.

21 Q Based upon the location and nature of  
22 Bettie Jones' wound, there was no reason that she  
23 would not have experienced conscious pain and  
24 suffering as a result of the nature of her wound.

1 True?

2 A Yes. I think that's true.

3 Q That's all I have.

4 MR. KENNEDY: I've got a few more.

5 FURTHER EXAMINATION

6 BY MR. KENNEDY:

7 Q Doctor, there was no evidence at autopsy  
8 that Quintonio LeGrier had any natural disease  
9 processes that would have shortened his lifespan.

10 Correct?

11 A Correct.

12 Q Quintonio LeGrier most likely experienced  
13 pain at the site of his injuries after being shot.

14 Correct?

15 A It's possible.

16 Q Quintonio LeGrier most likely experienced a  
17 feeling of impending doom and shortness of breath as  
18 he exsanguinated. Correct?

19 MS. BOUDREAUX: Calls for speculation.

20 THE WITNESS: I don't think I can speak to that.

21 BY MR. KENNEDY:

22 Q I wanted to clarify. In terms of your  
23 background, the only time you've testified before a  
24 trial as a paid consultant was that one case where

1 Ms. Boudreax hired you. Correct?

2 A No, actually, I'm sorry, there was another  
3 case in McHenry County where I was a paid consultant  
4 in a drug-induced homicide case. It's on the list.

5 Q And who was paying for your time on that  
6 case?

7 A It was a private law firm in Crystal Lake.  
8 I can find it for you if you need the -- let's see.  
9 People -- it's the last case listed. People versus  
10 John Linder.

11 Q So other than that case, the only time  
12 you've offered trial testimony as a paid consultant  
13 was when Ms. Boudreax retained you. Correct?

14 A I believe so. Yes.

15 Q And that was also a City of Chicago case.  
16 Correct?

17 A That's correct.

18 Q Except for the McHenry County case and the  
19 prior case when Ms. Boudreax retained you, all the  
20 other times you've testified at trial you've been  
21 testifying as the autopsy pathologist. Correct?

22 A I believe so.

23 I think there were a couple of times I  
24 testified in place of another Cook County

1 pathologist. But I was employed by the County.

2 Q In other words, you were the stand-in  
3 pathologist testifying to your colleague's autopsy  
4 findings. Correct?

5 A Yes. Correct.

6 Q And that was because the autopsy -- that  
7 was because your colleague was -- had moved out of  
8 state or was sick or was out on maternity leave,  
9 something like that. Correct?

10 A Correct. Yes. That's correct.

11 Q Did anyone assist you in the preparation of  
12 your report?

13 A No.

14 Q Did anyone assist you in summarizing or  
15 reviewing the materials in this case?

16 A No.

17 Q Did you submit a draft of your report to  
18 Ms. Boudreaux?

19 A I don't have a draft. I just use a  
20 Word document and change as I -- as I go.

21 Q Did you call and discuss your report with  
22 Ms. Boudreaux prior to submitting it to her?

23 A The report specifically? No.

24 Q Okay.

1 MR. ROGERS: I have a couple others.

2 FURTHER EXAMINATION

3 BY MR. ROGERS:

4 Q What percentage -- strike that.

5 In terms of your consulting work, what  
6 percentage of that has occurred where you were  
7 retained by a lawyer for the plaintiff, or injured  
8 party?

9 A Let's see. That's a good question.

10 I'm not sure that I have that.

11 Q Has all of your work been for the defense?

12 A I -- I believe so. I'll go back and  
13 double-check. And if I find otherwise, I will let  
14 you know, but ...

15 Q Okay. So as you sit here today, your  
16 recollection is that 100 percent of your consulting  
17 work as a forensic pathologist has been in support of  
18 the defense. True?

19 A Let me take another look. I'm trying to  
20 remember. Sorry.

21 Oh, well, yeah -- well, in Ross versus City  
22 of Chicago, I know -- that was my autopsy. But I was  
23 retained by the City and plaintiff's attorneys with  
24 that case.

1 Q I'm sorry, you were retained by who?

2 A The City and plaintiff's attorneys for Ross  
3 versus --

4 MR. KENNEDY: She was subpoenaed to testify.

5 THE WITNESS: Yeah, I was subpoenaed. I'm  
6 sorry, yeah, I wasn't paid for that. But that's the  
7 only thing I can think of that would be close to what  
8 you're asking.

9 MR. ROGERS: Oh.

10 THE WITNESS: So, no, I only have done some -- a  
11 few defense consults.

12 BY MR. ROGERS:

13 Q To your recollection, you've never been --  
14 you've never worked as a consultant on behalf of an  
15 injured plaintiff or the family of a deceased.  
16 Correct?

17 A I don't believe so. No.

18 Q Based on your recollection, and your review  
19 of your experience as a consultant, you've worked  
20 100 percent of the time for the defense. Correct?

21 A I believe so. Yes.

22 Q If I asked you to identify a percentage of  
23 time you spend in a given year doing consulting work,  
24 as compared to your other responsibilities in your

1 field of expertise, what percentage would you  
2 attribute to the consulting work?

3 A A very small percentage. I would say  
4 10 percent or less.

5 Q And how long have you been doing consulting  
6 work?

7 A On and off for about three or four years.  
8 It's just kind of catch-as-catch-can, honestly.

9 Q How did you get started doing consulting  
10 work?

11 A Just reference by a colleague.

12 Q Who was that?

13 A Jim Filkins.

14 Q Another forensic pathologist?

15 A Correct.

16 Q And who did he first refer you to?

17 A I think it was the other case that I worked  
18 with Barrett on. I think it was Othman versus City  
19 of Chicago.

20 Q So you started your work as a legal  
21 litigator -- strike that.

22 You started your work as a litigation  
23 consultant with Barrett Boudreaux. Is that correct?

24 A I believe so.

1 Q All right. And in 2017, how much money  
2 would you estimate you earned doing consulting work  
3 in this field?

4 A I don't think I did any last year, to be  
5 honest.

6 Q How about 2016? In 2016, how much money  
7 would you say you earned doing consulting work on  
8 legal matters?

9 A Let's see. Again, I don't think there was  
10 a consult in '16. It's -- I'm trying to  
11 differentiate in my head because I get paid for  
12 Cook County cases, because I no longer work there.  
13 But I don't think I was paid in '16 as a retained  
14 expert.

15 I think in '15 was the year I did Othman.  
16 So I was paid that year.

17 Q So in '15, what would you say you were paid  
18 doing consulting work?

19 A I don't -- I don't honestly know.

20 Q I saw your rate is \$600 per hour? Is that  
21 correct?

22 A Yes.

23 Q Was that your rate in 2015?

24 A I believe so, yes.

1 Q Do you know how many hours you've spent on  
2 this case up to today's date?

3 A A little more than -- I submitted the list.  
4 I don't remember. It was 30-something?

5 Q And you have some hours you obviously have  
6 not billed for, because at least you've completed  
7 your deposition. Correct?

8 A Correct.

9 Q You and Barrett Boudreaux are friends.  
10 Correct?

11 A Facebook friends. Which is totally  
12 different.

13 No, I just -- she has a son my son's age,  
14 more or less, so we've just -- that's it.

15 Q I've got a son, too.

16 A That's it. I mean, I've never met with her  
17 outside of professional cases, case work. Never gone  
18 out or anything like that.

19 We have colleagues who know each other.  
20 Like I know people she works with. She knows people  
21 I work with. And that's how we know each other. But  
22 we don't have a friendship outside of that.

23 Q Who else do you know that she works with?

24 A Dr. Segovia at the Medical Examiner's

1 Office. I believe she knows her through Dr. Filkins.  
2 And probably other cases she's done. So just --  
3 that's it.

4 Q Thank you.

5 MR. KENNEDY: I've got a couple follow-up.

6 THE WITNESS: Sure.

7 FURTHER EXAMINATION

8 BY MR. KENNEDY:

9 Q Dr. Filkins is both an MD and a JD.  
10 Correct?

11 A Yes.

12 Q And he was actually employed by the City of  
13 Chicago's Law Department for a time. Correct?

14 A Yes.

15 Q You described your consulting work earlier  
16 as catch-as-catch-can? Did I get that right?

17 A Yes.

18 Q Would it be your hope to continue to  
19 maintain your relationship with Ms. Boudreux and  
20 work on future cases with her?

21 MS. BOUDREUX: Object to relevance.

22 THE WITNESS: I accept work as I am able to take  
23 it. I have three kids and a full-time job.

24 So when I say catch-as-catch-can, I just

1 mean if I have the time to set aside for it, I will  
2 do it. It has nothing to do with who's offering it  
3 to me or ...

4 BY MR. KENNEDY:

5 Q Have you ever declined to consult on a  
6 case?

7 A Yes. I did just get a case offered me last  
8 month that I declined.

9 Q And that was the first time you've declined  
10 work that someone's offered to you. Correct?

11 A Yes.

12 Q And what was it about that matter that you  
13 weren't interested in or declined it? Why?

14 A I don't have the time.

15 Q Was that a plaintiff's case or a defense  
16 case, do you recall?

17 A It would be the defense again.

18 Q I think I'm done.

19 MS. BOUDREAUX: All right. I have a few.

20 EXAMINATION

21 BY MS. BOUDREAUX:

22 Q Does the fact that you worked with me on  
23 another case, did that affect any of your opinions in  
24 this case?

1 A No.

2 Q Did you base your opinions on the review of  
3 the record and the evidence, the autopsy findings?

4 A Yes.

5 Q And everything you've testified today you  
6 testified to to a reasonable degree of certainty in  
7 the field of forensic pathology. Correct?

8 A Yes.

9 Q Okay. And you reviewed the reports of Lary  
10 Simms? Correct?

11 A Yes.

12 Q And you reviewed the report of Judy  
13 Melinek. Right?

14 A Yes.

15 Q And Judy Melinek attached the x-rays of  
16 Quintonio LeGrier's lumbar injury. Correct?

17 A Yes.

18 Q And based on your review of this x-ray, are  
19 you able to tell the extent to which the partial  
20 transection of his spinal cord would have immediately  
21 paralyzed him?

22 A No.

23 Q Okay. Can anyone tell that based on this  
24 x-ray? (Indicating.)

1 A I doubt it.

2 Q Okay. That's all the questions I have.

3 We'll reserve.

4 THE VIDEO TECHNICIAN: This is the end of the  
5 deposition.

6 The time is 11:32 a.m. The length of this  
7 recording is 1 hour 17 minutes 37 seconds. And we  
8 are off the record.

9 (End of video record.)

10 THE REPORTER: Counsel, are you ordering this  
11 transcript?

12 MR. KENNEDY: Yes. I'll take it.

13 MS. BOUDREAUX: I'll take a copy.

14 THE REPORTER: Mr. Thomas, would you like a copy  
15 of the transcript?

16 MR. THOMAS: Yes. We'll take a copy, please.

17 Thank you.

18 (Proceedings adjourned at 11:32 a.m.)

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1 IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
COUNTY DEPARTMENT, LAW DIVISION

3 ANTONIO LEGRIER, etc., )  
4 Plaintiff, )  
5 -vs- ) No. 15 L 12964  
6 CITY OF CHICAGO, )  
7 Defendant. )  
----- )  
LATARSHA JONES, etc., et al., ) Cons. with  
Plaintiffs, )  
-vs- ) No. 16 L 00012  
CITY OF CHICAGO, )  
Defendant. )

9                 This is to certify that I have read my  
10 deposition taken on Friday, April 20, 2018, in the  
11 foregoing cause, and that the foregoing transcript  
12 accurately states the questions asked and the answers  
13 given by me, with the changes or corrections, if any,  
14 made on the Errata Sheet attached hereto.

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HILARY McELLIGOTT, MD

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HILARY McELLIGOTT, MD

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Notary Public

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1           I, LAURA L. KOOY, a Certified Shorthand  
2 Reporter within and for the State of Illinois, do  
3 hereby certify:

4           That previous to the commencement of the  
5 examination of the witness, the witness was duly  
6 sworn to testify the whole truth concerning the  
7 matters herein;

8           That the foregoing deposition was reported  
9 stenographically by me, was thereafter reduced to a  
10 printed transcript by me, and constitutes a true  
11 record of the testimony given and the proceedings  
12 had;

13           That the said deposition was taken before  
14 me at the time and place specified;

15           That the reading and signing by the witness  
16 of the deposition transcript was agreed upon as  
17 stated herein;

18           That I am not a relative or employee or  
19 attorney or counsel, nor a relative or employee of  
20 such attorney or counsel for any of the parties  
21 hereto, nor interested directly or indirectly in the  
22 outcome of this action.

23           IN WITNESS WHEREOF, I do hereunto set my  
24 hand this 22nd day of April, 2018.

25           \_\_\_\_\_  
26           LAURA L. KOOY, CSR, RDR, CRR  
27           Notary Public  
28           CSR No. 084-002467

